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RESPONSE UNDER 37 C.F.R. § 1.116
EXPEDITED PROCEDURE – Art Unit 3714
Attorney Docket N. 333628002US

Express Mail Label EV336673333US

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: DAVID J. THOMSEN

APPLICATION No.: 09/849,454

FILED: MAY 4, 2001

FOR: **SYSTEM AND METHOD FOR REMOTE
LEARNING, SUCH AS FOR COSTS AND
BENEFITS PERSONNEL AND
PROFESSIONALS**

EXAMINER: JOHN SOTOMAYOR

ART UNIT: 3714

CONF. No: 8656

Response Under 37 C.F.R. § 1.116

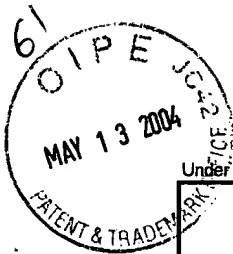
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Sir:

The present communication responds to the Office Action dated February 13, 2004, in the above-identified application.

The currently pending claims are reflected in the listing of claims beginning on page 2.

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PTO/SB/21 (02-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/849,454-Conf. #8656	
	Filing Date	May 4, 2001	
	First Named Inventor	David J. Thomsen	
	Art Unit	3714	
	Examiner Name	J. Sotomayor	
Total Number of Pages in This Submission	14	Attorney Docket Number	333628002US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		RECEIVED MAY 18 2004 TECHNOLOGY CENTER P3700

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	PERKINS COIE LLP Michelle C. Sarruf - 55,828
Signature	
Date	May 13, 2004

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